



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # P07168 1. Entity Name SAN ANTONIO SHOE, INC.	
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Principal Place of Business 1717 SAS DRIVE SAN ANTONIO, TX 78224 US	Mailing Address P.O. BOX 240700 SAN ANTONIO, TX 78224-0700 US
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DO NOT WRITE IN THIS SPACE

	
02202008	No Chg-P CR2E034 (11/05)
4. FEI Number 74-1885020	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000855150
 03/27/08-80036-021 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUBAR, DARRYL 1717 SAS DRIVE SAN ANTONIO, TX 78224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAAS, ANN BROOKE 1717 SAS DR SAN ANTONIO, TX 78224
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ann Brooke Haas Ann Brooke Haas 2/27/08 (210) 921-7425
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #